



Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use: *for* *JB*

Statement of Committee Organization

1. Statement Information

Date: 5-6-2016

Type: ☒ New ☐ Amended (if amending, enter MEC ID A161402 & section changed _____)

2. Committee Information

Committee to Elect Tami (Renfro) Owens Newton County Assessor

Name of Committee

10402 Holly Rd., Neosho, MO 64850

(417) 825-1785

Committee Mailing Address, City, State, & Zip

Telephone Number

Official Committee Email Address

Kay Baum

County Clerk or Board of Election Commissioners

Committee Type: ☐ Campaign ☒ Candidate ☐ Continuing (PAC) ☐ Debt Service ☐ Exploratory ☐ Political Party

3. Treasurer/Deputy Treasurer Information

Milton Day

Treasurer's Name (First & Last)

813 Roundup Hill, Neosho MO 64850

Treasurer's Mailing Address, City, State, & Zip

NA

Treasurer's Email Address (optional)

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Treasurer's Home Telephone Number

(417) 451-4167

Treasurer's Work Telephone Number

Deputy Treasurer's Name (if one appointed)

NA

Deputy Treasurer's Mailing Address, City, State, & Zip

Deputy Treasurer's Email Address (optional)

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Dep. Treasurer's Home Telephone Number

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Dep. Treasurer's Work Telephone Number

4. Additional Committee Information

NA

Additional Committee Officer's Name & Title (if any)

Additional Committee Officer's Mailing Address, City, State, & Zip

Connected Organization's Name (if any)

Connected Organization's Mailing Address, City, State, & Zip

CANDIDATES: Do you have more than one candidate committee? ☐ Yes (refer to instructions on back) ☒ No

5. Official Bank Account Information (required by all committees)

6. Candidate Supported or Opposed (candidate committees must include self, if candidate)

Tami (Renfro) Owens

Name & Mailing Address, City, State & Zip of Candidate

August 2, 2016

Election Date

County Assessor

Office Sought & Political Subdivision

(417) 825-1785

Telephone Number (Candidate Committees Only)

Republican

Political Party

support

Support or Oppose

7. Ballot Measure Supported or Opposed (campaign committees must complete this section)

NA

Name of Ballot Measure

Election Date & Political Subdivision

Support or Oppose

8. Signature(s) Check certification(s) & sign (required by all committees)

☒ I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.

Milton S. Day
Committee Treasurer

Tami (Renfro) Owens
Candidate (Candidate Committees Only)

FILED
NEWTON COUNTY, MO.
MAY 16 2016